

## DEPARTMENT OF BENEFIT PAYMENTS

744 P Street, Sacramento, CA 95814  
916-322-2214



August 25, 1977

ALL-COUNTY LETTER NO. 77-37 (ADULT PROGRAM MGT.)

TO: ALL COUNTY WELFARE DIRECTORS  
ALL COUNTY DATA PROCESSING MANAGERS

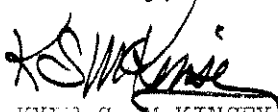
SUBJECT: PRODUCTION OF SDX REPORTS ON MICROFICHE

REFERENCE:

Currently, the State Data Exchange (SDX) monthly eligibility information file for SSI/SSP recipients is provided to counties by either magnetic tape or printed reports. The Department of Benefit Payments is studying the feasibility of providing this information on microfiche for those counties that desire the SDX on microfiche in lieu of magnetic tape or printed reports.

Attached is a questionnaire that will assist us in determining the practicality of this alternative method of data distribution. Your response by September 30, 1977 would be appreciated.

Sincerely,

  
KYLE S. McKINSEY  
Deputy Director

Enc

cc: CWDA

ADULT PROGRAM MANAGEMENT BRANCH

SDX MICROFICHE QUESTIONNAIRE

Please answer the following questions:

County \_\_\_\_\_

1. If your county receives magnetic tape, which do you produce for your operations?

A. ☐ Hard Copy

☐ Microfiche

Number of copies of fiche produced \_\_\_\_\_

B. Do you use tape for any other application? \_\_\_\_\_

2. Regardless of whether you presently receive magnetic tape or printed reports, would you like to receive the SDX on microfiche?

☐ Yes

☐ No

3. If microfiche were made available:

A. How many viewers do you now have available for adult aids program?

Eligibility Workers? \_\_\_\_\_ Medi-Cal Eligibility Workers? \_\_\_\_\_

B. How many viewers (42 X or 48 X magnification) would have to be purchased? \_\_\_\_\_

C. How many copies of the fiche would you need? \_\_\_\_\_

D. If it were possible to purchase viewers through the Department of Health State Master Contract at approximately \$175.00 each would your county be interested? \_\_\_\_\_

4. Who should be contacted to discuss this matter?

\_\_\_\_\_  
Name

( )

\_\_\_\_\_  
Phone

5. Other comments:

Please return this questionnaire by September 30, 1977 to: Department of Benefit Payments, Federal Program Operations Bureau, 744 P Street, MS 15-55, Sacramento, CA 95814.